

## CARDINAL

Our Cardinal Plan aims to provide medical cover for the individual within Nigeria. With this plan, individuals can access care in any of their chosen health facility to full service, individual-friendly healthcare coverage in an economy package. It Covers out-patient, in-patient, radiological, optical and dental services.

The plan allows the individual to access the following healthcare services:

<b>OUTPATIENT SERVICE</b>
<ul style="list-style-type: none"><li>• General and Specialist Medical Consultation</li><li>• Outpatient services</li><li>• Laboratory services</li><li>• Provision of prescribed drugs</li><li>• Counseling</li><li>• Physiotherapy</li><li>• Minor surgeries</li><li>• Annual Medical Examination</li></ul>
<b>INPATIENT SERVICES</b>
<ul style="list-style-type: none"><li>• Hospitalization in a standard general ward</li><li>• Intermediate surgeries</li><li>• Nursing care</li></ul>
<b>RADIOLOGICAL SERVICES</b>
<ul style="list-style-type: none"><li>• X-rays &amp; Ultrasound scans</li></ul>
<b>OPTICAL &amp; OPHTHALMOLOGICAL SERVICES</b>
<ul style="list-style-type: none"><li>• Eye examinations</li><li>• Treatment of infections</li><li>• Provision of optical lenses UP TO A LIMIT OF <b>N15,000</b> ONCE EVERY TWO YEARS</li></ul>
<b>DENTAL SERVICES</b>
<ul style="list-style-type: none"><li>• Routine Examination</li><li>• Dental Extractions [simple &amp; surgical]</li><li>• Dental fillings (Composite and Amalgam)</li></ul>

**EXCLUSIONS**

All services not indicated herein are excluded in this plan in addition to the general exclusions

**GENERAL EXCLUSIONS**

The following are excluded from all proposed plans: -

- Transplant surgery
- Plastic/cosmetic surgeries
- Other investigations and treatment for problems relating to infertility e.g hydrotubation, I.V.F, G.I.F.T and artificial insemination
- Virility enhancing drugs
- Herbal drugs, non-prescription drugs, food supplements and experimental drugs and treatment
- Dental care not listed in the covered services
- Home care and domiciliary services
- Joint replacements and prosthetic limbs
- Long term psychiatric illness (Longer than 6 months)
- Comprehensive health screening/well persons check outside the scope of the benefits covered by the selective health screening
- Treatment for newborns not registered on the plan after 6 weeks of birth.
- Self-inflicted injuries
- Treatment of obesity
- Speech disorders
- Room upgrades beyond that specified in the plan benefits
- Learning difficulties, behavioral and developmental problems
- Consultations with unrecognized consultants, hospitals, family doctors, therapists, dental practitioners or complementary medicines practitioners
- Any other treatment, service, procedure or investigation not listed in the schedule of covered medical services

**TARIFF****PER PERSON****N 75, 200****PER FAMILY****N250, 000**